STATEMENT OF

FORM 1	ORGANIZ (See instruct			Office use only
NAME OF COMMITTEE (in f	(Check if name is changed)	Example: If typying, type over the lines	e 12FE4M5	Clinice use only
Wells Fargo ar	nd Company-New Mexico PAC			
ADDRESS (number and s	P.O. Box 1081			
(Check if address is changed)	Albuquerque			87103
		CITY	STATE▲	ZIP CODE ▲
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one	e-mail address)		
(Check if address is changed)	wf.employeepac@\	wellsfargo.com		
a containing only				
COMMITTEE'S WEB I	PAGE ADDRESS (URL)			
(Check if address			111111	
is changed)	1,,,,,,,			
2. DATE 0.3	/ 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICA	TION NUMBER	C C00142844	·	
4. IS THIS STATEM	ENT NEW (N) OR	X AMENDED (A	A)	
I certify that I have examin	ned this Statement and to the best of my ki	nowledge and belief it is true, core	rect and complete	
Type or Print Name of	Treasurer Kim Ronquillo			
Signature of Treasurer	Electronically Filed by Kim Ron	quillo	Date 03	/ 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fal	se, erroneous, or incomplete information m	nay subject the person signing thi	·	-
Office Use Only		For further informate Federal Election Control Free 800-424-5	mmission 9530	FEC FORM 1 (Revised 02/2009)

	FEC F	Form 1 (Revised 02/2009)	Page 2
5.	TYPE OF CO	OMMITTEE (Check One)	
	Candidate C	Committee:	
	(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete t information below.)	he candidate
	Name of Candidate		
	Candidate Party Affiliati	Office Sought: House Senate President	State District
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate		
	Party Comm	nittee:	
	(d)	This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
	Political Act	tion Committee (PAC):	
	(e) X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:
		X Corporation Corporation w/o Capital Stock La	bor Organization
		Membership Organization Trade Association C	ooperative
		χ In addition, this committee is a Lobbyist/Registrant PAC.	
	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	d fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
_			
	Joint Fundra	ising Representative:	
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	r more political
	Com	mittees Participating in Joint Fundraiser	
		1. FEC ID number	
		2. FEC ID number	
		3. FEC ID number	
		EEC ID number	

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Write or Type Committee Name			
Wells Fargo and Com	pany-New Mexico PAC		
6. Name of Any Connected (Organization, Affiliated Committee, Joint Fundraising	Representative, or Leade	ership PAC Sponsor
Wells Fargo and Comp	any		
	<u> </u>		<u> </u>
Mailing Address	Sixth & Marquette		
	Minneapolis	MN L	55479
	CITY▲	STATE A	ZIP CODE 🛕
Relationship:			
X Connected Organization	n Affiliated Committee Joint Fundra	ising Representative	Leadership PAC Sponsor
possession of Committee Full Name Mailing Address	ee books and records. Bjerkness Wells Fargo Center		
	Sixth & Marquette		
	Minneapolis		55479
Title or Position ▼ Custodia	CITY A an of Records Telep	STATE A shone number 612	ZIP CODE A - 316 - 3857
name and address of a	e and address (phone number optional) of the ny designated agent (e.g., assistant treasurer). Ronquillo	treasurer of the commi	ttee; and the
Mailing Address	200 Lomas Boulevard N.W.		
	Albuquerque	NM _	87102 <u> </u>
Title or Position ♥	CITY ▲	STATE ▲	ZIP CODE A
PAC Ad	ministrator Teler	phone number505	_ 765 _ 5049

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Full Name of Designated Agent			
Mailing Address			
Title or Position ▼	CITY A	STATE A	ZIP CODE A
		elephone number	
9. Banks or Other Depos safety deposit boxes or	maintains funds.	e committee deposits funds, hol	ds accounts, rents
Name of Bank, Deposit	ory, etc. Nells Fargo Bank, N.A.		ı
Mailing Address	200 Lomas Boulevard N.W.		
	Albuquerque	NM L	87102
	CITY 🗻	STATE △	ZIP CODE 🛕
Name of Bank, Deposit	ory, etc.		
Mailing Address			
	CITY 🙇	STATE △	ZIP CODE 🛕

safety deposit boxes or ma	aintains funds.	•	
Name of Bank, Depository	, etc.		[ADDITIONAL]
Mailing Address			
	CITY ▲	STATE ⊿	ZIP CODE 🛕
-	d Organization, Affiliated Committee, Joint Fundraising	-	[ADDITIONAl
Mailing Address	Sixth and Marquette		
	MAC N9305-084		
	Minneapolis	MN	55479
utionship:	Minneapolis └	MN L L STATE ▲	55479
•		STATE A	
Connected Organization	CITY &	STATE A	ZIP CODE 🛦
Connected Organization	CITY &	STATE A	ZIP CODE A
Connected Organization Designated Agent	CITY &	STATE A	ZIP CODE A
Connected Organization Designated Agent Full Name	CITY &	STATE A	ZIP CODE A
	CITY &	STATE A	ZIP CODE A
Connected Organization Designated Agent Full Name Mailing Address	CITY A X Affiliated Committee Joint Fundraising	STATE A Lea	ZIP CODE A dership PAC Sponsor [ADDITIONAL]

Banks or Other Depositories: safety deposit boxes or maintains	List all banks or other depositories in which the committe s funds.	e deposits funds, ho	olds accounts, rents
Name of Bank, Depository, etc.			[ADDITIONAL]
Mailing Address			
I			
	CITY 🗻	STATE ⊿	ZIP CODE 🛕
Name of Any Connected Orga	nization, Affiliated Committee, Joint Fundraising Repre	sentative, or Lead	[ADDITIONAL] ership PAC Sponsor
Wells Fargo and Compan	y Employees Good Government Federal Fund I		
Mailing Address	301 South College Street		
	Charlotte	NC	28288 0024
Relationship:	CITY▲	STATE A	ZIP CODE 🛕
Connected Organization	X Affiliated Committee Joint Fundraising Repre	esentative Le	eadership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
Title or Position ▼	CITY A	STATE▲	ZIP CODE A
	Telephon	e number	
Joint Fundraiser Participant			[ADDITIONAL]
1	FEC	ID number C	

CITY △ Zation, Affiliated Committee, Joint Fundraising I Employees Good Governement Federal I 301 College Street	-	ZIP CODE A [ADDITIONAL] ZIP CODE A [ADDITIONAL]
zation, Affiliated Committee, Joint Fundraising I Employees Good Governement Federal I	Representative, or Lead	[ADDITIONAL]
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Employees Good Governement Federal I	-	_
Employees Good Governement Federal I	-	Letsing FAC Spoilson
301 College Street		
301 College Street		
Charlotte	NC	28288 - 0024
CITY▲	STATE	ZIP CODE ▲
X Affiliated Committee Joint Fundraising	Representative L	eadership PAC Sponsor
		[ADDITIONAL]
		_
CITY A	STATE A	ZIP CODE A
OII I A	SIAIL	ZIF CODE 4
Tele	ephone number	
		[ADDITIONAL]
	EEC ID number	
	CITY A X Affiliated Committee Joint Fundraising CITY A	CITY▲ STATE ▲ X Affiliated Committee Joint Fundraising Representative L

Banks or Other Depositories safety deposit boxes or mainta		nmittee deposits funds, hold	s accounts, rents
Name of Bank, Depository, etc		[ADDITIONAL]
		<u> </u>	
Mailing Address			
	CITY 🛕	STATE₄	ZIP CODE 🛕
			[ADDITIONAL
-	ganization, Affiliated Committee, Joint Fundraising F		
Mailing Address	301 South College Street		
	Charlotte	NC	28288 _ _ _ _ _ _
ationship:	CITY▲	STATE ▲	ZIP CODE
Connected Organization	X Affiliated Committee Joint Fundraising	Representative Lead	lership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
· ·			
Title or Position ▼	CITY A	STATE.	ZIP CODE A
	Tele	ephone number	
		priorie riumbei	[ADDITIONAL]
Joint Fundraiser Participant	i e		[ADDITIONAL]
		FEC ID number C	